| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
| | | | |
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | ✓ 3 | 12/20/00 |
| FORMALITY REVIEW | Sin | 922 | 03/28/01 |
| RESPONSE FORMALITY REVIEW | | | |
| | | | |

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| | | | | | |
|---|---|---|---|---|---|
| ✔ | .............................. Rejected | | N | .............................. Non-elected |
| = | .............................. Allowed | | I | .............................. Interference |
| — | (Through numeral)... Canceled | | A | .............................. Appeal |
| ÷ | .............................. Restricted | | O | .............................. Objected |

| Claim | | Date | | | | | Claim | | Date | | | | | Claim | | Date | | | | |
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| Final | Original | | | | | | Final | Original | | | | | | Final | Original | | | | | |
| 1 | ✔ | ✔ | ✔ | | | | 51 | | | | | | | 101 | | | | | | |
| 2 | ✔ | ✔ | ✔ | | | | 52 | | | | | | | 102 | | | | | | |
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If more than 150 claims or 10 actions
staple additional sheet here

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